Department of Defense Dependents Schools Performance Appraisal Form Non-Merit Pay Employees

Employee's Name (Last, First, Middle Initial)			Position Title, Series, Grade				
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School Location			Rating Period (From - To)				E E
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PERFORMANCE ELEMENT (If Critical, Check Box)		SATISFACTORY PERFORMANCE STANDARD COMMENTS		F Y	E S		
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Non-Merit Pay Form

			based upon the employee's performance in me	eting the re	quirements of the job performance standards.	
Signature indicates that a	particular step has been completed and under	rstood by al	I parties.			
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	Employee	Date	Supervisor (Rating Official)	Date	Reviewing Official	Date
			Supervisor	Date	Reviewing Official	Date
Elements/Standards Set			Supervisor	Date	Reviewing Official	Date
Elements/Standards Set			Supervisor	Date	Reviewing Official	Date
Elements/Standards Set			Supervisor	Date	Reviewing Official	Date
Elements/Standards Set Progress Review, If Any			Supervisor	Date	Reviewing Official	Date
			Supervisor	Date	Reviewing Official	Date
			Supervisor	Date	Reviewing Official	Date
			Supervisor	Date	Reviewing Official	Date
Progress Review, If Any			Supervisor	Date	Reviewing Official	Date
Progress Review, If Any	Employee		Supervisor		Reviewing Official LLY ACCEPTABLE UNACCEP	